

**NC DIVISION MH/DD/SAS COMMUNITY MENTAL HEALTH
SERVICES BLOCK GRANT (CMHSBG)
PROGRAM MONITORING
2009/2010**

LME:	Date:
Contract Provider:	
Rating Codes:	0 = No 1 = Yes
Rating	
1. There is evidence that funds are used to provide access to services to underserved mental health populations including homeless persons, rural populations and older adults.	
2. There is evidence that services are provided to any adult with Serious Mental Illness (SMI) or child with Severe Emotional Disturbance (SED) regardless of ability to pay.	
3. There is evidence of LME support for the promotion, provider training, implementation and monitoring of evidenced based treatment services for adults.	
4. There is evidence of LME support for the promotion, provider training, implementation and monitoring of evidenced based treatment services for children.	
5. There is evidence that services are provided to meet the needs of specific eligible mental health populations.	
6. There is evidence of mental health consumer, youth and family involvement in the development and implementation of the mental health community system of care.	
7. The LME and their contract providers have a system in place to prevent inappropriate disclosure of individual records.	
COMMENTS:	
REVIEWER:	

**NC DIVISION MH/DD/SAS COMMUNITY MENTAL HEALTH
SERVICES BLOCK GRANT (CMHSBG)
PROGRAM MONITORING INSTRUCTIONS
2009/2010**

1. The monitor will review evidence that the LME ensures funds are used to provide access to services to underserved mental health populations including homeless persons, rural populations and older adults. Evidence may include contracts with providers, MOAs with providers, monitoring of providers, review of services, flyers, etc.
2. The monitor will review evidence that the LME ensures through policies, protocol, procedures, etc. services are provided to any adult with Serious Mental Illness (SMI) or child with Severe Emotional Disturbance (SED) regardless of ability to pay.
3. The monitor will review evidence of LME support for the promotion, provider training, implementation and monitoring of evidenced based treatment services for adults. For example: documentation of training, documentation of monitoring, etc. Evidenced based services for adults include (this list is not all inclusive): Assertive Community Treatment, Supported Employment, Medication Algorithms, Integrated Dual Diagnosis Treatment, Family Psychoeducation, Self-Management and Supported Housing.
4. The monitor will review evidence of LME support for the promotion, provider training, implementation and monitoring of evidenced based treatment services for children. For example: documentation of training, documentation of monitoring, etc. Evidence-based services for children or youth include (this list is not all inclusive): Multisystemic Therapy, Therapeutic Foster Care, Functional Family Therapy, School-Based Interventions, Incredible Years, Helping the Non-Compliant Child, Parent-Child Interaction Therapy, Parent Management Training – Oregon, Brief Strategic Family Therapy, Problem Solving Skills Training, Coping Power, Cognitive Behavior Therapy for Depression, Cognitive Behavior Therapy for Anxiety, Trauma-focused Behavior Therapy, and Interpersonal Therapy for Depression.
5. Such as those who are deaf and hard of hearing, those who experienced trauma (e.g. violence, abuse), or those servicing or have served in the military.
6. Examples include representation of a youth/family consumer and an adult consumer of mental health services in the CFAC, community collaboration, policy development, peer supports, family partners, monitoring and advocacy, among others.
7. The monitor will review policy/procedure, etc. that indicate the LME and their contract providers have a system in place to prevent inappropriate disclosure of individual records.